Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

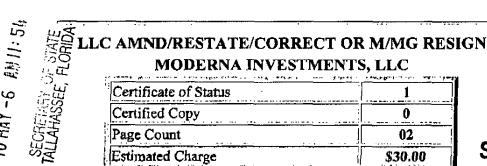
Account Name : PAUL SALVER, P.A.

Account Number : I20020000087 : (954)389-1333 Phone

: (954)389-1397 Fax Number

\*\*Enter the email address for this business entity to be used for  $\operatorname{full}$ annual report mailings. Enter only one email address please.\*

Email Address:



S. HAWKES MAY 07 2010

**EXAMINER** 

S. HAWIVE

S. HAWKES

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02

EXAMINER

Electronic Filing Menu

Corporate Filing Menu EXAIVITINER Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Mode	<u>rna investments, LLC</u>		
(Name of the Limited Linh	ility Company as it now appeared a Limited Liability Company)	rs on our records.)	100 6
(A Floi:	ida Elimied Elabinty Company)		
The Articles of Organization for this Limited Liabilit	ty Company were filed on	9/30/09	and assigned
Florida document number L09000094423	<u> </u>		55 G.
This amendment is submitted to amend the following  A. If amending name, enter the new name of the		<u>'e</u> :	W 8:51
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compa	ny," the designation	"LLC" or the abbreviation
Enter new principal offices address, if applicable:			و المحالة المراجع المحالة المراجع المحالة المح
(Principal office address MUST BE A STREET AD	DDRESS)		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)			· · · · · · · · · · · · · · · · · · ·
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		our records, <u>enter</u>	the name of the ne
Name of New Registered Agent:			
New Registered Office Address:			
	Ent	er Florida street ad	dress
		, Florida	
	City		Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Type of Action **Title** <u>Name</u> Address MGR Salvador Spinello 920 SW 153 Court Miami, FL 33194 Zonia M. Campos-Moreno MGR 920 SW 153 Court Miami, FL 33194 ∏ Add Remove ☐ Add Remove □Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated signature of a member or authorized representative of a member

Typed or printed name of signee
Page 2 of 2

Salvador Spinello

Filing Fee: \$25.00